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PP RUEHGI RUEHMA RUEHROV
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ZNR UUUUU ZZH
P 191407Z AUG 07
FM AMEMBASSY KHARTOUM
TO RUEHC/SECSTATE WASHDC PRIORITY 8244
INFO RUCNFUR/DARFUR COLLECTIVE PRIORITY
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UNCLAS SECTION 01 OF 02 KHARTOUM 001297

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STATE FOR AF/SPG, PRM, AND ALSO PASS USAID/W USAID FOR DCHA SUDAN TEAM, AFR/SP NAIROBI FOR USAID/DCHA/OFDA, USAID/REDSO, AND FAS GENEVA FOR NKYLOH NAIROBI FOR SFO NSC FOR PMARCHAM, MMAGAN, AND TSHORTLEY ADDIS ABABA FOR USAU USUN FOR TMALY BRUSSELS FOR PBROWN

E.O. 12958: N/A

TAGS: <u>EAID PREF PGOV PHUM SOCI UN SU</u>
SUBJECT: DARFUR - MALNUTITION UPDATE

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- 11. Summary: The UN Office for the Coordination of Humanitarian Affairs (OCHA) reports that recent Darfur nutrition survey results indicate the first significant increase in malnutrition in the region since 2004. According to USAID partner the UN Children's Fund (UNICEF), six localized nutrition surveys conducted in May and June -- two in North Darfur, three in South Darfur, and one in West Darfur -- found global acute malnutrition (GAM) rates above the emergency threshold of 15 percent. In three of the six surveys, rates were above 2006 levels. Although exact causes for the increased rates require further investigation, UNICEF identified population movement, persistent insecurity resulting in diminished beneficiary access to services, and inadequate water and sanitation services as contributing factors.
- 12. Humanitarian agencies continue to provide essential health and nutrition services and adjust response efforts to meet increased needs. USAID funds nutrition programs in all three Darfur states through implementing partners Action Contre la Faim (ACF), Save the Children/United States (SC/US), Relief International, GOAL, and UNICEF. End summary.

LOCALIZED NUTRITION SURVEY RESULTS

13. On August 1, UNICEF released the results of six localized nutrition surveys conducted in Kabkabiya, Abu Shouk and As Salaam internally displaced person (IDP) camps, Al Salam IDP camp, Otash IDP camp, Kass, and El Geneina town and IDP camps, indicating GAM rates above the emergency threshold of 15 percent. While an increase in GAM rates is in line with seasonal trends, survey results for three locations in North and West Darfur were higher than 2006 levels. For the three surveys conducted in South Darfur, comparable 2006 data was not available. UNICEF has also observed a recent increase in supplementary feeding center (SFC) admissions for moderate malnutrition and an increase in therapeutic feeding center (TFC) admissions for treatment of severe malnutrition in Darfur. Recent survey results indicate the first significant increase in malnutrition in the Darfur region since late 2004, according to OCHA.

CONTRIBUTING FACTORS

14. UNICEF and partners are further investigating underlying causes for the increase in malnutrition rates, but have highlighted insecurity, population movements, and inadequate water and sanitation conditions as contributing factors. UNICEF emphasized the role of insecurity in preventing humanitarian agencies from providing sustained, quality services in program areas, as well as reducing beneficiary access to existing health and nutrition services.

UNICEF also noted the impact of the Sudanese government ban on the use of F100 and F75 therapeutic milk, following quality concerns of stocks in Khartoum. Although the temporary ban from April 7 to July 4 was not systematically applied, UNICEF reported increased rates of diarrheal disease where therapeutic milks were not being used.

HUMANITARIAN RESPONSE

- 15. Humanitarian agencies continue to provide essential health and nutrition services and adjust response efforts to meet increased needs. In Al Salam IDP camp in South Darfur, USAID partner ACF has expanded its SFC to serve 500 beneficiaries per week and its outpatient therapeutic program to serve 250 severely malnourished children per week. USAID funds nutrition programs in all three Darfur states through implementing partners ACF, SC/US, Relief International, GOAL, and UNICEF. Despite sufficient funds to support emergency interventions, UNICEF notes that insecurity prevents access to certain areas and fewer organizations are currently working in the nutrition sector than in 2006.
- 16. UNICEF is undertaking a thorough review of all nutrition information to identify gaps and underlying causes of the decline. In addition, from August 11 to September 10, interagency assessments are being conducted in the region as part of the annual emergency

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food security and nutrition assessment, with results expected in mid-October. In September, a USAID/OFDA and Centers for Disease Control nutrition specialist will be deployed to Darfur to assess the overall nutrition situation and inform USAID programming response to emerging nutrition needs.

POWERS